

09/235,387

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>mc</i>		2-1-99
O.I.P.E. CLASSIFIER		59	2-2
FORMALITY REVIEW		7143	2/18/44
		7145	4/19/44

INDEX OF CLAIMS

+ Rejected
 - Allowed
 (Through numeral)..... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	✓	✓	11/10/2
2	✓	✓	2/10
3	✓	✓	2/10
4	✓	✓	2/10
5	✓	✓	2/10
6	✓	✓	2/10
7	✓	✓	2/10
8	✓	✓	2/10
9	✓	✓	2/10
10	✓	✓	2/10
11	✓	✓	2/10
12	✓	✓	2/10
13	✓	✓	2/10
14	✓	✓	2/10
15	✓	✓	2/10
16	✓	✓	2/10
17	✓	✓	2/10
18	✓	✓	2/10
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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